Case 21-11823-pmm Doc 29 Filed 12/02/21 Entered 12/02/21 13:50:57 Desc Main Document Page 1 of 2

Eill	in this information to identify your											
	in this information to identify your optor 1 Kathy Lynn											
	otor 2 puse, if filing)				_							
Uni	ted States Bankruptcy Court for the	e: EASTERN DISTRICT	OF PENNSYLVANIA	١								
Cas	se number 21-11823					С	heck if this is	:				
(If kr	nown)		-				An amende	ed filing				
									g postpetition ollowing date:			
O	fficial Form 106I						MM / DD/ `	YYYY				
S	chedule I: Your Inc	ome								12/1		
spo atta		ur spouse is not filing wi On the top of any additi	th you, do not inclu	de infori	mati	on ab	out your sp	ouse. If mo	ore space is	needed,		
1.	Fill in your employment information.		Debtor 1				Debtor 2 or non-filing spouse					
	If you have more than one job,	Employment status	■ Employed				☐ Employed					
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not employed					
		Occupation	Office Coordinator									
	Include part-time, seasonal, or self-employed work.	Employer's name	Paolinis Cast S		_							
	Occupation may include student or homemaker, if it applies.	Employer's address	1800 S. Delaware Drive Easton, PA 18042									
		How long employed to	here? 1 Year									
Par	t 2: Give Details About Mo	nthly Income										
spou	mate monthly income as of the cuse unless you are separated. u or your non-filing spouse have me space, attach a separate sheet to	ore than one employer, co	, c					·	•	J		
						For	Debtor 1		btor 2 or ng spouse			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		2,610.00	\$	N/A	-		
3.	Estimate and list monthly over	time pay.		3.	+\$		318.00	+\$	N/A	-		
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		2,928.00	\$	N/A			

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Kathy Lynn Grim	_		Case n	number (<i>if k</i>	now	n)	21-11	823		
					For I	Debtor 1				ebtor 2		
	Cop	y line 4 here	4.		\$	2,92	B.O	0	\$	iiiig ə	N/A	_
_	-				· —	_,,,_		_	· —			<u>-</u>
5.		all payroll deductions:	-	_	œ.	- 4		_	æ			
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$	54:			\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		» \$		0.0 0.0		\$ 		N/A N/A	_
	5d.	Required repayments of retirement fund loans	50		\$—		0.0 0.0	_	\$		N/A	_
	5e.	Insurance	56		\$		0.0	_	\$		N/A	_
	5f.	Domestic support obligations	5f		\$		0.0	_	\$		N/A	_
	5g.	Union dues	50		\$		0.0		\$		N/A	_
	5h.	Other deductions. Specify:		า.+	\$			0 +	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	54:	2.0	0	\$		N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,38	6.0	0	\$		N/A	_
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							· 			_
		monthly net income.	88		\$		0.0		\$		N/A	_
	8b.	Interest and dividends	. 8b	٥.	\$	(0.0	0_	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	1 t 80	Э.	\$	(0.0	0	\$		N/A	
	8d.	Unemployment compensation	80	d.	\$	(0.0	0	\$		N/A	_
	8e.	Social Security	86	Э.	\$	(0.0	0	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.0		\$		N/A	_
	8g.	Pension or retirement income	8(_	\$		0.0		\$		N/A	_
	8h.	Other monthly income. Specify: Pro-rated tax refund	8ł	า.+	· —			0 -			N/A	_
		Misc Cleaning Jobs			\$	70	0.0	0_	\$		N/A	<u>.</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	88	5.0	0	\$		N/A	A
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	3	3,271.00	_ [\$		N/A	= \$	3,271.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		,		,,27 1.00		Ť-			-	0,27 1.0
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedul and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no	ır dep			,			•	chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certains						,		12.	\$	3,271.00
13.	Do y	you expect an increase or decrease within the year after you file this forn No.	n?								Combi month	nea ly income
		Yes. Explain: Debtor is seeking additional sources of income and the schedules will be amended according to the schedules.										nalv.
											wi	·· ::

Official Form 106I Schedule I: Your Income page 2